

# MEMORANDUM

Agenda Item No. 11(A)(5)

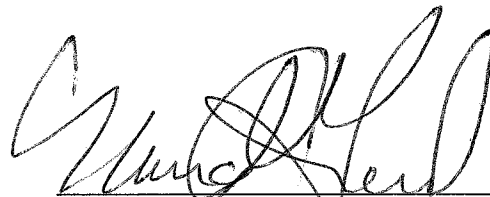
**TO:** Honorable Chairman Joe A. Martinez  
and Members, Board of County Commissioners

**DATE** September 8, 2005

**FROM:** Murray A. Greenberg  
County Attorney

**SUBJECT:** Resolution retroactively  
authorizing in-kind services  
for the City of North Miami's  
July 4th Carnival

The accompanying resolution was prepared and placed on the agenda at the request of Commissioner Sally A. Heyman and Commissioner Barbara J. Jordan.

  
Murray A. Greenberg  
County Attorney

MAG/jls



# MEMORANDUM

(Revised)

**TO:** Honorable Chairman Joe A. Martinez  
and Members, Board of County Commissioners

**DATE:** September 8, 2005

**FROM:** Murray A. Greenberg  
County Attorney

**SUBJECT:** Agenda Item No. 11(A)(5)

Please note any items checked.

- ☐ "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- ☐ 6 weeks required between first reading and public hearing
- ☐ 4 weeks notification to municipal officials required prior to public hearing
- ☐ Decreases revenues or increases expenditures without balancing budget
- ☐ Budget required
- ☐ Statement of fiscal impact required
- ☐ Bid waiver requiring County Manager's written recommendation
- ☐ Ordinance creating a new board requires detailed County Manager's report for public hearing
- ☐ Housekeeping item (no policy decision required)
- ☐ No committee review

Approved \_\_\_\_\_ Mayor  
Veto \_\_\_\_\_  
Override \_\_\_\_\_

Agenda Item No. 11(A)(5)  
9-8-05

RESOLUTION NO. \_\_\_\_\_

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE FIRE RESCUE DEPARTMENT FOR THE CITY OF NORTH MIAMI'S JULY 4, 2005 ALL-WEEKEND CARNIVAL IN AN AMOUNT NOT TO EXCEED \$4,736.00 TO BE FUNDED FROM THE MIAMI-DADE FIRE RESCUE DEPARTMENT BUDGET

**WHEREAS**, the City of North Miami has requested in-kind services from the Miami-Dade Fire Rescue Department for its July 4, 2005 all-weekend carnival in an amount not to exceed \$4,736.00 (see attached Fee Waiver/In-Kind Service Application); and

**WHEREAS**, the City of North Miami's July 4, 2005 all-weekend carnival is a special event, as that term is defined in the attached Fee Waiver/In-Kind Service Application, and the in-kind services shall be funded from the Miami-Dade Fire Rescue budget,

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA**, that this Board retroactively authorizes in-kind services from the Miami-Dade Fire Rescue Department for the City of North Miami's July 4, 2005 all-weekend carnival in an amount not to exceed \$4,736.00 to be funded from the Miami-Dade Fire Rescue Department's budget.

The foregoing resolution was sponsored by Commissioner Sally A. Heyman and Commissioner Barbara J. Jordan and offered by Commissioner \_\_\_\_\_, who moved its adoption. The motion was seconded by Commissioner \_\_\_\_\_ and upon being put to a vote, the vote was as follows:

Joe A. Martinez, Chairman  
Dennis C. Moss, Vice-Chairman

Bruno A. Barreiro  
Jose "Pepe" Diaz  
Sally A. Heyman  
Dorrian D. Rolle  
Katy Sorenson  
Sen. Javier D. Souto

Dr. Barbara Carey-Shuler  
Carlos A. Gimenez  
Barbara J. Jordan  
Natacha Seijas  
Rebeca Sosa

The Chairperson thereupon declared the resolution duly passed and adopted this 8<sup>th</sup> day of September, 2005. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA  
BY ITS BOARD OF  
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: \_\_\_\_\_  
Deputy Clerk

Approved by County Attorney as  
to form and legal sufficiency.



Mariela Martinez-Cid

**MIAMI-DADE COUNTY  
FEE WAIVER/IN-KIND SERVICES APPLICATION**

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Special Events Staff  
Communications Department  
111 N.W. 1st Street, Suite 2510  
Miami, FL 33128

Phone: (305) 375-2836  
Fax: (305) 375-3968

Type of Event/Application (select one of the following):

- ☐ District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
- ☐ Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- ☒ Special Event - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 60 days prior to event date.)
- ☐ Major Event - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)

1. Full legal name of the requesting organization: City of North Miami Parks and Recreation Department

2. Applicant Status: (Select one of the choices below)

- ☐ Not-For-Profit or Tax Exempt ☒ Local Government or Public Entity
- ☐ For-Profit
- ☐ County Sponsored Event/Sponsoring Department \_\_\_\_\_
- ☐ Other (specify): \_\_\_\_\_

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.):

Andrea A. Ramos 305-893-6511 Ext. 2227 / 305-892-81039  
176 N.E. 125th Street N. Miami, FL 33161 aramos@northmiami.fl.gov

4. Specify fee waiver or in-kind service requested (quantify, if applicable):

(see attached)

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):

City of North Miami All Weekend Carnival 4th of July Festival  
Friday, 7/1 6pm-12am  
Saturday, 7/2 12pm-12am  
Sunday, 7/3 1pm-12am  
Monday, 7/4 1pm-11pm  
\* Music, Food, Carnival Bides, Fireworks \* more.

6. Please select ALL that apply to event:

- ☐ Economic Development: Event supports vitality or growth of the local economy
- ☐ Youth/Education: Event benefits youth of any age and/or offers educational benefits
- ☐ Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- ☒ Arts and Culture: Event supports music, theatre, literature, art or culture
- ☐ Environmental: Event benefits environmental concerns or promotes conservation
- ☐ Sports and Athletics: Event supports/promotes organized sports or recreational participation

7. Physical address of event venues (please specify Commission District(s)):

North Miami Athletic Stadium  
2555 NE 151 Street

MIAMI-DADE COUNTY  
FEE WAIVER/IN-KIND SERVICES APPLICATION

8. Description of regional or local impact: Dependent upon uncertain weather circumstances, we will have an estimated attendance approx. 1000 guests with an additional 5000 the actual July 4th day. Support from our municipal police department will be available during event times.
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): (see attached)
10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): (see attached)
11. Expected number of participants and estimated attendance (per day, if applicable): 1st Time Venue;  
Regular July 4th Event: 4,000 participants
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): (see attached)

I hereby certify that all the statements made in this application are true and correct.

Clarence Patterson  
Signature of Authorized Representative

6-27-05  
Date

**City of North Miami**  
**July 4th Weekend Carnival & Festival**  
**Additional Cost Report**  
**July 1 - July 4th, 2005**

DESCRIPTION	Total Expense for Carnival & Fireworks	Budgeted Amount for Fireworks Event	Cost to the Carnival company	City's Liability Cost for the Carnival
STAFF	\$ 7,271.00	\$ 7,180.00		\$ 91.00
SHUTTLE TRANSPORTATION (TO SITE)	\$ 253.00			\$ 253.00
POLICE	\$ 14,878.00	\$ 3,040.00	\$ 9,804.00	\$ 2,034.00
JULY 4TH MISCELLANEOUS EXPENSES	\$ 5,240.00	\$ 5,240.00		
FIREWORKS	\$ 16,000.00	\$ 16,000.00		
ADVERTISING/PUBLICITY	\$ 10,000.00	\$ 4,000.00	\$ 3,000.00	\$ 3,000.00
SOUND	\$ 3,000.00	\$ 3,000.00		
PORT-O-LETS	\$ 470.00			\$ 470.00
BARRICADES	\$ 450.00	\$ 375.00		\$ 75.00
*INSURANCE/SPECIAL EVENT	\$ 2,000.00	\$ 785.00		\$ 1,215.00
TOTAL	\$ 59,562.00	\$ 39,620.00		
TOTAL ADDITIONAL COST			**\$12,804.00	\$ 7,138.00

\*Pending for a final quote from the insurance company.

\*\*Some of the costs such as security, garbage disposal and liability insurance are not captured.

TO: 993053755634

P.8/8

MIAMI-DADE FIRE RESCUE

**SPECIAL EVENTS BUREAU**

9300 N.W. 41 STREET

MIAMI, FLORIDA 33178

OFFICE (786) 331-5000 / FAX (786) 331-4435

**SPECIAL EVENTS ESTIMATE SHEET**

Invoice Number: \_\_\_\_\_

Date: \_\_\_\_\_

Control Number: \_\_\_\_\_

Prepared By: \_\_\_\_\_

**VENDOR INFORMATION**Name: City of North Miami 4th of July FestivalBilling Address: Estimate for Commissioner Heyman at overtime rate

City: \_\_\_\_\_

State: Florida

Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

**PERSONNEL**

Rank/Title	Overtime Hourly Rate	Quantity	Event Hours	Total
Chief Fire Officer	\$ 75.00			\$ -
Captain	\$ 65.00	1	22	\$ 1,430.00
Lieutenant	\$ 55.00	1	21	\$ 1,155.00
Fire Fighter	\$ 50.00	1	43	\$ 2,150.00
Fire Prevention Inspector	\$ 55.00			\$ -
Beach Manager	\$ 30.25			\$ -
Lifeguard 2	\$ 26.75			\$ -
Lifeguard 1	\$ 22.75			\$ -
Civilian (Overtime Rate Only)	\$ 30.00			\$ -
DISPATCHER				
Personnel Total				\$ 4,735.00

**EQUIPMENT**

Type	Hourly Rate	Quantity	Event Hours	Total
Pumper	\$ 100.00			\$ -
QRV / TRT	\$ 65.00			\$ -
Rescue Truck	\$ 50.00			\$ -
Motorcycle Unit	\$ 40.00			\$ -
Rescue Cart	\$ 35.00			\$ -
Rigid Hull Inflatable Boat (RHIB)	\$ 35.00			\$ -
Personal Watercraft (PWC)	\$ 35.00			\$ -
Bicycle Unit	\$ 35.00			\$ -

Equipment Total \$ -

Personnel Total \$ 4,735.00

5% Administrative Fee \$ -

Total Event Estimate \$ 4,735.00

Please make checks payable to: Board of County Commissioners

Please note: The Board of County Commissioners set all rates through County Administrative Order 7-33.

**NOTE:** The above costs are only an estimate for your event. Any permit related inspection costs (tents, stages, etc.) and/or other related firewatch and rescue standby related costs will be borne by the vendor. Required permit inspections must be completed before occupying or use. After hours or weekend inspections will be billed at a rate of \$50.00 per hour with a minimum 4-hour charge.

Rev. 07/01/04



# Memorandum



**Date:** September 8, 2005

**To:** Honorable Chairman Joe A. Martinez  
and Members, Board of County Commissioners

**From:** George M. Burgess  
County Manager

**Subject:** Countywide Specific In-Kind Reserve Request Recommendation

---

The Office of Strategic Business Management has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration.

## Background

A retroactive waiver for in-kind services has been requested by the City of North Miami Parks and Recreation Department for their All Weekend Carnival 4<sup>th</sup> of July Festival held on July 1 through 4, 2005.

In-kind services have been requested in the amount of \$4,735 from the Miami-Dade Fire Rescue Department for emergency services. The in-kind requested does not effect the countywide in-kind reserve.

In FY 2004-05 the City of North Miami Parks and Recreation Department has not received any County funding for this event.

inkind06705